

Box ISSUE FEE

(Depositor's name)

with applicable fees, to:

Assistant Commissioner for Patents . Washington, D.C. 20231

MAILING INSTRUCTOR SHOULD be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee MAILING INSTRUCT Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

MM91/0313

Oliff & Berridge PLC P 0 Box 19928 Alexandria VA 22320

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee. Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Malling

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

							(Signature)
							(Date)
APPLICATION NO.	FILING DATE	TOTAL	L.CLAIMS	EXAMINER AND GROUP A		TUNIT	DATE MAILED
09/499,638	02/08/00	020	WEBB,	В		2839	03/13/01
First Named Applicant LEHMANN,		35	USC 154	(b)	term ext. =	0 Days	

TITLE OF INVENTIONE MALE TYPE CONTACT PIECE ENABLING ELECTRICAL CONTACT WITH A MALE ELEM **ENT**

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE	
3 105396	439-843.00	0 D41	UTILITY	Y YES \$	620.00	06/13/01	
1. Change of correspondence address Use of PTO form(s) and Customer I Change of correspondence addre PTO/S8/122) attached. 1. The Address Indication (or "Fee	Number are recommended, but ess (or Change of Corresponde	(1) the names of attorneys or ago the name of a member a regiand the names	ing on the patent front page, list nes of up to 3 registered patent or agents OR, atternatively, (2) of a single firm (having as a registered attorney or agent) nes of up to 2 registered patent or agents. If no name is listed, no e printed.				
3. ASSIGNEE NAME AND RESIDENCE PLEASE NOTE: Unless an assigne Inclusion of assignee data is only a the PTO or is being submitted unde filling an assignment. (A) NAME OF ASSIGNEE Preci-Dip Durtal (B) RESIDENCE: (CITY & STATE OF Delemont, Switzer Please check the appropriate assigning individual (C) Corporation of Corp	arks): No. 11973: f Copies	es should be charged to:					
The COMMISSIONER OF PATENTS (Authorized Signature) Eric D. Morehouse, R NOTE: The Issue Fee will not be accessor agent; or the assignee or other partirademark Office. Burden Hour Statement: This form depending on the needs of the individe complete this form should be set Office, Washington, D.C. 20231. D ADDRESS. SEND FEES AND TH Patents, Washington D.C. 20231 Under the Paperwork Reduction According to the page to the pag	pted from anyone other than the price of the	(Date 06/ ne applicant; a regiscords of the Pater urs to complete. on the amount of Officer, Patent ar DMPLETED FOR e, Assistant Com	O8/01 stered attorney at and Time will vary time required and Trademark BMS TO THIS amissioner for	06/12/2001 BMSUYEN	2 00000155 0949	9638 620.00 @P	
	TRANS	MIT THIS	FORM WITH	FFF			